Image# 10930364128

STATEMENT OF

FORM 1	ORGANIZATION (See instructions)	Office use only
NAME OF COMMITTEE (in	full) (Check if name Example: If typying, type over the lines	12FE4M5
WIN BACK AN	IERICA POLITICAL ACTION COMMITTEE	
ADDRESS (number and	PO BOX 1131	
(Check if address is changed)	s	
	ANDERSON	IN 46015 - 46015
	CITY▲	STATE▲ ZIP CODE ▲
COMMITTEE'S E-MA	IL ADDRESS (Please provide only one e-mail address)	
(Check if addressis changed)	jeanneluttrull@mikepence.com	
is changed)		
COMMITTEE'S WEB	PAGE ADDRESS (URL)	
(Check if addres is changed)	s	
2. DATE 0 2		
3. FEC IDENTIFICA	TION NUMBER C C00383927	
4. IS THIS STATEN	MENT NEW (N) OR X AMENDED (A)	_
4. IS THIS STATEM	NEW (N) OIL	
Loortify that I have even	ined this Statement and to the best of my knowledge and belief it is true, correct	and complete
r certify that I have exam	med this Statement and to the best of my knowledge and belief it is true, correct	and complete
Type or Print Name of	Treasurer William R. Neale	
Signature of Treasure	Electronically Filed by William R. Neale	Date 02 / 24 / YYYYY
NOTE: Submission of fa	lse, erroneous, or incomplete information may subject the person signing this S ANY CHANGE IN INFORMATION SHOULD BE REPORTE	
Office Use Only	For further informatic Federal Election Comm Toll Free 800-424-953	ission FEC FORM 1